Customer Profile for Retirement Worksheet

General Information:

Name________________________________ Phone#________________________

Address______________________________ Date of Birth____________________

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Spouse's Name____________________________ Date of Birth____________________

Annual Income____________________ **Spouse's Income_________________**

Other Income _____________________ **Spouse's Other__________________**

Non-registered Assets
(i.e. rental properties, dividends, interest) **Current Value** **Owned By**

__________________________ ________________ ____________________

__________________________ ________________ ____________________

__________________________ ________________ ____________________

Registered Assets
(RRIF, RSPs)

__________________________ ________________ ____________________

__________________________ ________________ ____________________

__________________________ ________________ ____________________

Company Pension*

Yours_______________________ ________________ Indexed _____yes ______no

Spouse______________________ ________________ Indexed _____yes ______no

***please attach last pension statement if available**

Life Insurance	**Amount**	**Cash Value** (if any)	**Insured**
____________________	_________	______________	______________
____________________	_________	______________	______________
____________________	_________	______________	______________

Monthly Expenses*	**Current**	**At Retirement**
________________	________________	_________________

*optional budgeting worksheet attached for more detail

Planned Retirement Age ______________ **Spouse's________________**

Retirement Target Income______________

Current Retirement Benefits:

Canada Pension Plan Benefits
Current maximum for 2001 is $775 per month if taken at age 65 – CPP Statement of Contributions is issued annually and estimates your CPP payments expected at your age 65

Old Age Security Benefits
Current maximum for 2001 is $440 per month. Generally, you will receive full OAS if you have lived in Canada at least 40 years since age 18. You may qualify less than 40 years residency if you were born in or before July 1, 1952. Partial benefits 1/40 for each year of residency after age 18.

Estimated CPP ______________ **Spouse ___________________**

Estimated OAS______________ **Spouse___________________**

Est. Pension_________________ **Spouse___________________**

Other Financial Retirement Goals:

Do you plan to travel during retirement and if so, how often?

____

Will you need any special withdrawals and if so, when? (ie large purchases, gifts)

____

Would you like to leave a legacy to your heirs/estate? $ _________________

Do you foresee any significant income changes prior to retirement? For example, income changes due to leave of absence, change to part time work, etc.

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Do you have Critical Illness Insurance Coverage? If so, details are:

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Do you have Long Term Care Coverage in place? If so details are:

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Additional Notes:

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Optional Budgeting Worksheet

1. INCOME	Client	Spouse
SOURCES OF INCOME		
Employment		
Self-employment		
Investment (Interest)		
Investment (Dividends)		
Investment (Rents)		
Annuities		
Pension		
Family Allowances		
Alimony		
Other Income		
Other Income		
Total Income:		
DEDUCTIONS		
Federal/Provincial Tax		
CPP		
Employment Insurance		
Government Health Insurance		
Other Deductions		
Other Deductions		
Total Deductions:		
NET INCOME:		

2. FIXED EXPENSES

	Client	Spouse
HOUSING		
Mortgage/Rent		
Property Taxes		
Hydro		
Water		
Heat		
Cable/Satellite TV		
Telephone		
Other Housing		
Other Housing		
Other Housing		
Housing Subtotal:		

MISCELLANEOUS		
Installment Loans		
Car Loan		
Car Insurance		
Life/Disability Insurance		
Property/Casualty Insurance		
Children Day Care		
Children Education		
Alimony		
Club Memberships		
Other Miscellaneous		
Other Miscellaneous		
Other Miscellaneous		
Miscellaneous Subtotal:		

SAVINGS/INVESTMENTS		
Retirement Savings		
Investment Loans		
Pension Plan		
Regular Savings		
Other Savings		
Other Savings		
Savings/Investment Subtotal:		

FIXED EXPENSES*:*		

3. VARIABLE EXPENSES

HOUSING		
Food		
Clothing		
Car Maintenance		
Non-Auto Transportation		
Medical/Dental		
Pocket Money		
Gifts		
Entertainment		
Other Household		
Other Household		
Other Household		
Housing Subtotal:		

VARIABLE EXPENSES:		
TOTAL EXPENSES:		
SURPLUS/(DEFICIT):		